

## Application Data Sheet

### Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD_R?::	None
Number of CD disks::	0
Number of copies of CDs::	0
Sequence Submission::	No
Computer Readable Form (CRF)?::	No
Title::	ANTIMICROBIAL COMPOSITIONS INCLUDING CARBOXYLIC ACIDS AND ALKOXYLATED AMINES
Attorney Docket Number::	163.1796US01
Request For Early Publication::	No
Request For Non-Publication::	No
Suggested Drawing Figure::	None
Total Drawing Sheets::	0
Small Entity::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Initial 08/04/03

## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: DANIEL  
Middle Name:: E.  
Family Name:: PEDERSEN  
Name Suffix::  
City of Residence:: COTTAGE GROVE  
State or Province of Residence:: MINNESOTA  
Country of Residence:: U.S.A.  
Street of mailing address:: 8798 INDIAN BLVD. S.  
City of mailing address:: COTTAGE GROVE  
State or Province of mailing address:: MINNESOTA  
Country of mailing address:: U.S.A.  
Postal or Zip Code of mailing address:: 55016

## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: STEVEN  
Middle Name:: E.  
Family Name:: LENTSCH  
Name Suffix::  
City of Residence:: ST. PAUL  
State or Province of Residence:: MINNESOTA  
Country of Residence:: U.S.A.  
Street of mailing address:: 21 ORME COURT

Initial 08/04/03

City of mailing address:: ST. PAUL  
State or Province of mailing address:: MINNESOTA  
Country of mailing address:: U.S.A.  
Postal or Zip Code of mailing address:: 55116

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: JESSICA  
Middle Name:: S.  
Family Name:: HAMMERBERG  
Name Suffix::  
City of Residence:: ROSEMOUNT  
State or Province of Residence:: MINNESOTA  
Country of Residence:: U.S.A.  
Street of mailing address:: 14908 COLORADO AVE.  
City of mailing address:: ROSEMOUNT  
State or Province of mailing address:: MINNESOTA  
Country of mailing address:: U.S.A.  
Postal or Zip Code of mailing address:: 55068

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: BRANDON  
Middle Name::  
Family Name:: HERDT

Initial 08/04/03

Name Suffix::  
City of Residence:: HASTINGS  
State or Province of Residence:: MINNESOTA  
Country of Residence:: U.S.A.  
Street of mailing address:: 11600 LEEWARD AVE. S.  
City of mailing address:: HASTINGS  
State or Province of mailing address:: MINNESOTA  
Country of mailing address:: U.S.A.  
Postal or Zip Code of mailing address:: 55033

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: VICTOR  
Middle Name:: F.  
Family Name:: MAN  
Name Suffix::  
City of Residence:: ST. PAUL  
State or Province of Residence:: MINNESOTA  
Country of Residence:: U.S.A.  
Street of mailing address:: 1410 CARLING DR. #207  
City of mailing address:: ST. PAUL  
State or Province of mailing address:: MINNESOTA  
Country of mailing address:: U.S.A.  
Postal or Zip Code of mailing address:: 55108

### Correspondence Information

Correspondence Customer Number:: 23552

Initial 08/04/03

## Representative Information

Representative Customer Number::	23552
----------------------------------	-------